ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION			1 1	
O.I.P.E. CLASSIFIER		4/3	2/26/01	
FORMALITY REVIEW	- D	TC 873	103-05-01	
RESPONSE FORMALITY REVIEW	ym	651	6/29/61	

INDEX OF CLAIMS

-	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

÷ Restricted 0 Objected								
Claim	Date	Claim	Date	С	laim	Date		
Final Original		Final Original		i i	<u>a</u>			
		51			101			
2 V		52			102			
3 V		53			103			
4		54		++++	104			
(5)		55			105			
· 7 V		56			106			
8	 	58			108			
9		59		++	109			
10		60		+++	110	++++++		
11		61			111			
12		62			112			
13		63			113			
14		64			114			
15		65			115			
16		66			116			
17		67			117			
18		68			118			
19		69			119			
20		70			120			
21		71			121			
22		72	 	 	122			
23 24		73		 	123 124			
25	- 	75		 				
26		76			125 126			
27		77		+++ +	127	 		
28		78		+++	128			
29		79			129	 		
30		80		 	130			
31		81			131			
32		82			132			
33		83			133			
34		84			134			
35		85			135			
36		86		+++	136			
37 38		88	\vdash	 	137			
39		89	 	+	138			
40		90	├─┼ ┼┼	++-	139	- - - - -		
41		91	├─┤ ┤┤ ┤		140			
42		92		++	141			
43		93	┝┼┼┼┼	++	142	- 		
44		94	 		144	- - - - - - - -		
45		95	 	+++ -	145	┈╎┈┼┈┤╸╏┈┠╸┤╸┦ ┈┤		
46		96	 	 	146			
47		97		- -	147	- - - - - - - - - - - - - -		
48		98		 	148			
49		99			149	- 		
50		100			150			

If more than 150 claims or 10 actions staple additional sheet here

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